

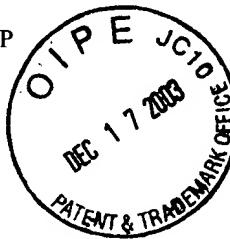
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)
 7590 09/16/2003

HODGSON RUSS LLP
 INTELLECTUAL PROPERTY LAW GROUP
 ONE M & T PLAZA
 SUITE 2000
 BUFFALO, NY 14203-2391



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Barbara Haggerty	(Depositor's name)
<i>Barbara Haggerty</i>	
December 15, 2003	
(Signature)	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/676,836	09/29/2000	CHRISTOPHER T COTTON	21295/100	1389

TITLE OF INVENTION: REFRACTOMETER FOR MONITORING WATER CONTENT IN FLUIDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	12/16/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, MICHELLE P	2851	356-136000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Hodgson Russ LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Reichert, Inc.

Depew, NY

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

- Issue Fee
 Publication Fee
 Advance Order - # of Copies 10

4b. Payment of Fee(s):

- A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) (Date) 12/15/2003

George L. Snyder, Jr., Reg. # 37,729

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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12/16/2003 SDIRETAC 00000045 09676836

01 FC:1501	1330.00 0P
02 FC:6001	30.00 0P

TRANSMIT THIS FORM WITH FEE(S)

PTO/SB/17 (10-03) Approved for use through 07/31/2006, OMB 0651-0032 FEETRANSMITTAL for FY 2004												
<i>Effective 10/01/2003. Patent Fees are subject to annual revision.</i>												
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.												
TOTAL AMOUNT OF PAYMENT		(\$1,360.00)		Application Number 09/676,836 Filing Date 09/29/2000 First Named Inventor Christopher T. Cotton et al. Examiner Name Group/Art Unit Attorney Docket Number 39159.0324								
METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)									
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account: Deposit Account Number: 08-2442 Deposit Account Name: Hodgson Russ LLP Title Director is hereby authorized to (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any fee deficiencies or credit any overpayments <input type="checkbox"/> Charge any additional fees during pendency of this application. <input type="checkbox"/> Charge fees indicated below, except for the filing fee to the above-identified deposit account			3. ADDITIONAL FEES									
			Large Entity	Small Entity								
			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid				
			1051	130	2051	65	Surcharge - late filing fee or oath	\$				
			1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	\$				
			1053	130	1053	130	Non-English specification	\$				
FEE CALCULATION			1812	2,520	1812	2,520	For filing a request for ex parte reexamination	\$				
1. BASIC FILING FEE			1804	920*	1804	920*	Requesting Publication of SIR prior to Examiner Action	\$				
Large Entity Small Entity Fee Code (\$) Fee Code (\$) Fee Description Fee Paid			1805	1,840*	1805	1,840*	Requesting Publication of SIR after Examiner Action	\$				
1001	770	2001	385	Utility filing fee	\$	1251	110	2251	55	Extension for reply within first month	\$	
1002	340	2002	170	Design filing fee	\$	1252	420	2252	210	Extension for reply within second month	\$	
1003	530	2003	265	Plant filing fee	\$	1253	950	2253	475	Extension for reply within third month	\$	
1004	770	2004	385	Reissue filing fee	\$	1254	1,480	2254	740	Extension for reply within fourth month	\$	
1005	160	2005	80	Provisional filing fee	\$	1255	2,010	2255	1,005	Extension for reply within fifth month	\$	
SUBTOTAL (1)			\$0	1401	330	2401	165	Notice of Appeal			\$	
2. EXTRA CLAIM FEES FOR UTILITY/ REISSUE			Fee Paid	1402	330	2402	165	Filing a brief in support of an appeal			\$	
Total Claims	/ / -20** =	/ / x	/ / =	\$	1403	290	2403	145	Request for oral hearing			\$
Independent Claims	/ / - 3** =	/ / x	/ / =	\$	1451	1,510	1451	1,510	Petition to institute a public use proceeding			\$
Multiple dependent	/ / x	/ / =	\$	1452	110	2452	55	Petition to revive - unavoidable			\$	
Large Entity Small Entity Fee Code (\$) Fee Code (\$) Fee Description Fee Paid			1453	1,330	2453	665	Petition to revive - unintentional			\$		
			1501	1,330	2501	665	10 advance copies Utility issue fee (or reissue)			\$30 \$1330		
1202	18	2202	9	Claims in excess of 20	\$	1502	480	2502	240	Design issue fee	\$	
1201	86	2201	43	Independent claims in excess of 3	\$	1503	640	2503	320	Plant issue fee	\$	
1203	290	2203	145	Multiple dependent claim if not paid	\$	1460	130	1460	130	Petitions to the Commissioner	\$	
1204	86	2204	43	**Reissue independent claims over original patent	\$	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	\$	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	\$	1806	180	1806	180	Submission of Information Disclosure Statement	\$	
SUBTOTAL (2)			\$0	8021	40	8021	40	Recording each patent assignment per property (times number of properties)			\$	
SUBMITTED BY:			Reg. No. 37,729	1809	770	2809	385	Filing a submission after final rejection(37 CFR 1.129(a))			\$	
SIGNATURE				1810	770	2810	385	For each add'l invention to be examined(37 CFR 1.129(b))			\$	
DATE: December 15, 2003 Telephone: (716) 848-1545			1801	770	2801	385	Request For Continued Examination (RCE)			\$		
			1802	900	1802	900	Request for Expedited Examination of a design application			\$		
			Other fee (specify)							\$		
			*Reduced by basic filing fee paid							SUBTOTAL (3)	\$1360	

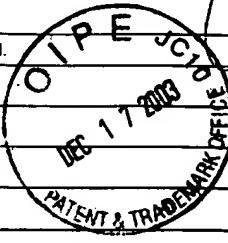
I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on December 15, 2003.

Barbara Haggerty
Name

Barbara Haggerty
Signature

December 15, 2003
Date of Signature

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